Sut	Substitute for form 1449/PTO			Complete if Known	
addition of females (Application Number	10/579,141-Conf. #6382
INFORMATION DISCLOSURE STATEMENT BY APPLICANT			SCLOSURE	Filing Date	December 28, 2006
			APPLICANT	First Named Inventor	Shigemasa SUGA
_	(Use as many sheets as necess ary)			Art Unit	1796
				Examiner Name	G. E. Webb
Sheet	1	of	1	Attorney Docket Number	5376-0101PUS1

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journ el, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, andor country where published.	Ĭ ²		
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*EXAMINER: Initial if reference considered, whether or not obtains a in conformance with MPEP 000. Draw line through obtainer if not in conformance and not considered, bedue copy of the form with nect communication to applicant. "Applicants under costen designation number (optically." See Kridt Codes of page 100 or 100 or